## DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

i bei	neve I am the original, : d helow) of the subject	first and sole inventor (if only one nam matter which is claimed and for which	ie is listed ( a patent is	pelow) or an original sought on the inventi	, first and joint inventor on entitled:	(if plura) names are
	ergistic Dietary For	rmulations for Treatment of Inf thetk one)	flammato	ry Conditions		
X	is attached hereto was filed on as Application Serial No and		and v	was amended on		f applicable).
I her	reby state that I have re indiment referred to above	viewed and understand the contents of e.	the above-	identified specificant	n, including the claims,	as amended by any
I aci Regi	knowledge the duty to culations § 1.56.	tisclose information which is known by	y me to be	material to patentab	ility as defined in Title	37, Code of Federal
I her and	eby appoint as my amorr Trademark Office com	neys, with full powers of substitution and ected therewith: Dr. Melvin Blecher, F	i revocation Reg. No. 33	, to prosecute this app 3,649.	olication and transact all l	ousiness in the Patent
Senc Mel	l all correspondence to vin Blecher at Tel. (20)	4329 Van Ness St., NW, Second Floor 2)-363- <u>3338: FAX (202) 362-8404</u> .	r, Washings	en. DC 20016-5625.	Address telephone com	munications to <u>Dr.</u>
I her to be fine valid	thy declare that all state strue; and further that i or imprisonment, or bo lity of the application of	ments made herein of my own knowled these statements were made with the kr th, under Section 1001 of Title 18 of th r any patent issued thereon.	ige are true nowledge the United St	and that all statement at willful false stater ates Code and that su	s made on information a nents and the like so ma ch wiliful false statemen	nd belief are believed de are punishable by is may jeopardize the
F	Full Name of First or Sole Inventor			Signature of First or Sole Inventor		Date
7	heoharis C. Theo	harides, PhD, MD		2		1/18/2001
Residence Address				Country of Citizenship		
14 Parkman St.			United States of Ameri		America	
P	ost Office Address					
	trookline, MA 024 USA)	146				